

*DIVISION OF ADMINISTRATION*

**CONDITIONAL OFFER OF EMPLOYMENT**

Applicant Name: \_\_\_\_\_ SS#: \_\_\_\_\_  
(Please print)

Applicant Phone Number: (home) \_\_\_\_\_ work) \_\_\_\_\_ (cell) \_\_\_\_\_

Dear Applicant,

This is a **Conditional** Offer of Employment to a position with the: \_\_\_\_\_  
(Section or division)

In the job title of: \_\_\_\_\_

In the following status: \_\_\_\_\_  
(Permanent status) or (Probationary status for up to 24 months) or (Other)

The conditions which **must be met in order for this offer to be made a final and real offer of employment include**, but are not limited to:

- 1) **You must take and pass a drug test.**
- 2) **You must meet all requirements for the job title including, but not limited to, meeting the Department of State Civil Service (DSCS) Minimum Qualification Requirements for the position.**
- 3) **The salary you may be offered must be verified to be in compliance with Division of Administration (DOA) policy and DSCS rules. The appointing authority must approve the salary.**
- 4) **All male prospective employees, ages 18 through 25, are required to be registered with Selective Service (this can be done on the Internet at <http://www.sss.gov>).**
- 5) **You must agree to receive wage and compensation payments via direct deposit, through electronic transfer of funds, into a checking or savings account at a bank, savings and loan, or credit union which is authorized by the DOA.**
- 6) **You must agree to allow recoupment of any and all funds received by you in error, without the necessity of any action other than prior notification to you of the amount paid in error.**
- 7) **You must acknowledge that you have received Form SSA-1945, related to the Federal Social Security Protection Act of 2004 (Public Law 108-203), which explains that it is possible there will be a reduction in my future Social Security benefit entitlement.**

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CONDITIONAL Offer Made By

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Date

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Phone Number

I understand the conditions attached to this Conditional Offer of Employment. I further understand that this is a **conditional** offer of employment not a final offer of employment. I understand that this **conditional** offer of employment may be withdrawn at any time

(FOR USE BY OHR ONLY BELOW THIS LINE)

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(Applicant signature)

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(Date)

Witnessed by:

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(OHR official signature)

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(Date)